IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Vijay Kumar HANDA et al.

Confirmation No.:

Application No.:

To be Assigned

Group Art Unit:

Filing Date:

Concurrently herewith

Examiner:

A PROCESS FOR PREPARING

Attorney Docket No.: 7893-4000

FLORFENICOL

POWER OF ATTORNEY BY ASSIGNEE AND EXCLUSION OF INVENTOR(S) UNDER 37 C.F.R. 3.71

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

The undersigned assignee of the entire interest in the above-identified subject application hereby appoints Allan A. Fanucci (Reg. No. 30,256) and Daniel J. Hulseberg (Reg. No. 36,554) of WINSTON & STRAWN LLP (Customer No. 28765) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith.

Please direct all correspondence for this application to Customer No. 28765 to the attention of Allan A. Fanucci (telephone 212-294-3311, facsimile 212-294-4700).

An assignment of the entire interest in the above-identified subject application is submitted herewith for recording and a copy is attached.

The undersigned has reviewed this assignment and, to the best of his/her knowledge, title is in the assignee seeking to take action in this application and that he/she is empowered to act on its behalf.

| ASSIGNEE: | AUROBINDO PHARMA LIMITED | |
|--------------------|-----------------------------------|--|
| Signature: | Vijay Kuman Hander | |
| Date of Signature: | Vijay Kuman Hander 12/12/2003 | |
| Typed Name: | Dr. Vijay Kumar Handa | |
| Position/Title: | President | |
| Address: | Plot No. 2, Maitrivihar Complex | |
| | Ameernet Hyderabad 500 038, INDIA | |

WINSTON & STRAWN LLP DOCKET NO.: 7893-4000

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION

As a below named inventor, we each individually hereby declare that:

My residence, post office address and citizenship are as stated below beneath my name.

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

A PROCESS FOR PREPARING FLORFENICOL

| and for which a patent applicance is attached hereto and include | es amendment(s) filed on | | • | | (îf applicable) | |
|---|-------------------------------------|---------------------------|---------------------------------------|-----------------|---------------------------------|--|
| was filed in the United States | on | as Application | n No. | | (ij applicable) (declaration | |
| not accompanying application | n) with amendment(s) filed o | ַ מ | | | (If applicable) | |
| □ was filed in the United States on | | on | | and was amended | | |
| dide FC1 Ardice 19 on | | | | _ (if applic | able) | |
| I hereby state that I have reviewed any amendment referred to above | d and understand the contents e. | of the above identified a | oplication, in | cluding the | elaims, as amended b | |
| I acknowledge the duty to disclo Regulations, § 1.56. | se information known to me | to be material to patenta | bility as defi | ined in Titl | e 37, Code of Federa | |
| I hereby claim foreign priority be inventor's certificate listed below filing date before that of the appli | cation on which priority is cl | aimed: | on for patent | or inventor | 's certificate having | |
| EARLIEST FOREIGN APP | LICATION(S), IF ANY, FIL | | | E OF THE | APPLICATION | |
| APPLICATION NUMBER | COUNTRY | | DATE OF PILING (day, month, year) | | PRIORITY CLAIMED | |
| 806/CHE/2003 | Iodia | 06 October 2 | | Ø YES | □ NO | |
| | | | | ☐ YES | · □ NO | |
| I hereby claim the benefit under T | | § 119(c) of any United S | tates provisi | onal applic | ation(s) listed below | |
| PROVISIONAL APPLI | CATION NUMBER | | FILING DATE | | | |
| · | | | | | | |
| | | | | | | |
| I hereby claim the benefit under Tit subject matter of each of the claims the first paragraph of Title 35, Unit to patentability as defined in Title 3 application and the national or PC | ed States Code § 112, I ackno | wledge the duty to disclo | States applic | ation in the | manner provided by | |
| NON-PROVISIONAL | CII DIG D I MA | STATUS | | | | |
| APPLICATION NO. | FILING DATE | PATENTED | PEND | | ABANDONED | |
| | | | | | TESTANDONES | |
| | | - | · · · · · · · · · · · · · · · · · · · | | | |
| | | - | | L | | |

DC:335583.1

^{*} for use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

| 7,7- | | on or any barent issuits meret | ρη, | | | |
|---------------------------|---|---|--|--|--|--|
| | LASTNAME | FIRST NAME | MIDDLE NAME | | | |
| INVENTOR | HANDA | Vijay | Kumar | Kumar | | |
| RESIDENCE & | CITY | STATE OR POREION COUNTRY | COUNTRY OF CITIZES | NSHIP | | |
| CITIZENSHIP | Banjara Hills | Hyderabad, India | India | | | |
| POST OFFICE | STREET | CITY | STATE OR | ZIP CODE | | |
| ADDRESS | Piot No. 88A, Sarale Nivas | Banjara Hills | COUNTRY | 500 034 | | |
| | Sagar Society, Road No 2 | | Hyderabad, | 555 454 | | |
| L | | | India | i | | |
| • | | | DATE | | | |
| | 1 | Handa | 12/12/20 | 03. | | |
| FULL NAME OF | LAST NAME | FERST NAME | MIDDLE NAME | | | |
| INVENTOR | GUPTA | Arun | Kumar | | | |
| RESIDENCE & | слу | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZEN | \$HIP | | |
| | Kukatpally | Hyderabad, India | India | India | | |
| | | СПУ | STATE OR | ZIP CODE | | |
| ADDRESS | | Kukatpally | COUNTRY . | 500 072 | | |
| | | 1 | Hyderabad, | | | |
| <u> </u> | | | India | | | |
| SIGNATURE OF INVENTOR 202 | | | DATE | | | |
| | 9841. | | 12/12/26 | 63 | | |
| | • | FIRST NAME | MIDDLE NAME | | | |
| | | Meenakshisunderam | | • | | |
| | | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENS | नामः | | |
| | | Hyderabad, India | India | India | | |
| | | CITY | STATE OR | ZIF CODE | | |
| VDDKR22 | D-1, Hidden Treasure Apts. | Somajiguda | COUNTRY | 500 082 | | |
| ł | roor Ayappa Swami Temple Lane | | Hyderabad, | | | |
| | SIGNATI DE OF DUITABLE CO | | India | | | |
| ľ | Walter INVENTOR 203 | | DATE | | | |
| | 1:114 AM /1 - | | 12/12/20 | | | |
| | INVENTOR RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS FULL NAME OF INVENTOR | FULL NAME OF INVENTOR Banjara Hills POST OFFICE ADDRESS FULL NAME OF INVENTOR 201 FULL NAME OF INVENTOR 202 SIGNATURE OF INVENTOR 202 FULL NAME OF INVENTOR 203 FULL NAME OF INVENTOR 203 FULL NAME OF INVENTOR 203 | FULL NAME OF INVENTOR HANDA RESIDENCE & CITY Banjara Hills FOST OFFICE ADDRESS FULL NAME OF INVENTOR 201 FULL NAME OF INVENTOR RESIDENCE & CITY STREET FIOT NO. 88A, Sarala Nivas Sagar Society, Road No 2 SIGNATURE OF INVENTOR 201 FULL NAME OF INVENTOR GUPTA RESIDENCE & CITY FULL NAME OF INVENTOR CITY Kukatpally FOST OFFICE ADDRESS FULL NAME OF INVENTOR STREET HOUSE NO. 102, Sof Brindavanam Apartments Vivekananda Nagar Colomy SIGNATURE OF INVENTOR 202 FULL NAME OF INVENTOR FULL NAME OF INVENTOR SIGNATURE OF INVENTOR 202 FULL NAME OF INVENTOR FULL NAME OF INVENTOR SIVAKUMARAN RESIDENCE & CITY GITY Kukatpally FUST NAME Meenakshisunderam FULL NAME OF INVENTOR SIVAKUMARAN RESIDENCE & CITY CITY STATE OR FOREIGN COUNTRY Hyderabad, India CITY STATE OR FOREIGN COUNTRY Hyderabad, India CITY SOMAJIguda SIGNATURE OF INVENTOR 203 SIGNATURE OF INVENTOR 203 | RESIDENCE & CITY STATE OR FOREIGN COUNTRY Hyderabad, India FOST OFFICE ADDRESS Sagar Society, Rond No 2 FULL NAME OF INVENTOR GUPTA RESIDENCE & CITY STATE OR FOREIGN COUNTRY Hyderabad, India SIGNATURE OF INVENTOR 201 FULL NAME OF INVENTOR 201 FULL NAME OF INVENTOR 201 FUST OFFICE ADDRESS STREET FULL NAME OF INVENTOR 202 FULL NAME OF INVENTOR 203 FUST OFFICE ADDRESS SIGNATURE OF INVENTOR 202 FULL NAME OF INVENTOR 203 FULL NAME OF INVENTOR 204 FULL NAME OF INVENTOR 205 FULL NAME OF INVENTOR | | |